

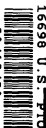
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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No. <b>648.42465CX1</b>  First Inventor <b>YASUI, NAOIKI</b>  Title <b>PLASMA PROCESSING APPARATUS AND PLASMA PROCESSING METHOD</b>  Express Mail Label No.
<b>APPLICATION ELEMENTS</b> SEE MPEP chapter 600 concerning utility patent application contents.		<b>ADDRESS TO:</b> Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>		
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		
3. <input checked="" type="checkbox"/> Specification <span style="float: right;">[Total Pages: <b>43</b>]</span> <small>(Written description and claims)</small> -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R & D -Reference to sequence listing, a table, or a computer program listing appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure		
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="float: right;">[Total Pages: <b>15</b>]</span>		
5. Oath or Declaration <span style="float: right;">[Total Pages: <b>1</b>]</span> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <small>(for continuation/divisional with Box 18 completed)</small> i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s)          Named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</small>		
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		
7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies		
<b>ACCOMPANYING APPLICATION PARTS</b>		
9. <input type="checkbox"/> Assignment Papers (cover sheet & documents(s))		
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small>		
11. <input type="checkbox"/> English Translation Document (if applicable)		
12. <input checked="" type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Citations Statement (IDS)/PTO-1449		
13. <input checked="" type="checkbox"/> Preliminary Amendment		
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>		
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>		
16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.		
17. <input checked="" type="checkbox"/> Other: <b>Reaffirmation of Claim for Priority</b>		
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: <b>10/358,894</b> Prior application information: Examiner: _____ Art Unit: _____ <b>FOR CONTINUATION OR DIVISIONAL APPS ONLY:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.		
<b>19. CORRESPONDENCE ADDRESS</b>		
<input type="checkbox"/> Customer Number <b>020457</b> OR <input type="checkbox"/> Correspondence address below		
Name <b>ANTONELLI, TERRY, STOUT &amp; KRAUS, LLP</b>		
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Country _____ Telephone <b>(703) 312-6600</b> Fax <b>(703) 312-6666</b>		
Name <b>Melvin Kraus</b> Registration No. (Attorney/Agent) <b>22,466</b>		
Signature <i>Melvin Kraus</i> Date <b>SEPTEMBER 10, 2003</b>		

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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16698 U.S. PTO

PTO/US-17 (01-03)

Approved for use through 04/30/2003. OMB 0651-0032  
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FEE TRANSMITTAL for FY 2003				Comp'l te if Known																																																																																																																																																							
Effective 01/01/2003. Patent fees are subject to annual revision.  <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 <b>TOTAL AMOUNT OF PAYMENT</b> (\$) <b>1,114.00</b>				Application Number																																																																																																																																																							
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<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None  <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number 01-2135 Deposit Account Name Antonelli, Terry, Stout & Kraus, LLP The Commissioner authorized to: (check all that apply) <input type="checkbox"/> Charge fees indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fees indicated below, except for the filing fee to the above-identified deposit account.				<b>3. ADDITIONAL FEES</b> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th>Fee Code</th> <th>Large Entity (\$)</th> <th>Small Entity (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65 Surcharge – late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25 Surcharge – late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130 Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520 For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920* Requesting publication of SIR prior to Examination action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840* Requesting publication of SIR after Examiner action</td><td></td></tr> 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